## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u>

(703) 746-4000

INSTRUCTIONS:	This form should be	used for transmitting th	e ISSUE FEE and	PUBLICATION I	FEE (if required).	Blocks 1 through :	5 should be compl	eted where
appropriate. All fu	irther correspondence is	cluding the Patent, adv	ance orders and no	tification of mainte	enance fees will be	mailed to the curr	ent correspondence	address a
		ted otherwise in Block	l, by (a) specitying	a new correspond	ence address; and/e	or (b) indicating a s	separate "FEE ADI	DRESS" fo
maintenance fee no	otifications.							

CURRENT CORRESPONDENCE	E ADDRESS (Note: Use Block 1 for	r any change of address)	OIPA	Note: A certificate of	f mailing can only be used for is certificate cannot be used	or domestic mailings of the			
22020 75	590 06/02/2005			papers. Each addition	al paper, such as an assignment of mailing or transmission.	ent or formal drawing, must			
23838 75 KENYON & KE	.,.	/	SEP On S	0					
1 BROADWAY	NION	( <u>R</u>	SEP 0 2 2005	hereby certify that the	rtificate of Mailing or Tran his Fee(s) Transmittal is bein	smission g deposited with the United			
NEW YORK, NY		AND	٠	States Postal Service to the Mai	his Fee(s) Transmittal is bein with sufficient postage for fir il Stop ISSUE FEE address PTO (703) 746-4000, on the	st class mail in an envelope above, or being facsimile			
06/2005 SSITHIB2 0000		25	PAREMARKS.		BHINE HMZDY	(Depositor's name)			
FC:1501 1400.00 FC:1504 300.00	DA DA			4	D'EVNUVX'	(Signature)			
FC:8001 30.00		•		August	31,7005	(Date)			
APPLICATION NO.	APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		CONFIRMATION NO.			
10/758,025	01/16/2004		Jean Hildeshein	1	1662/636021	6234			
TITLE OF INVENTION: C.					1002,00002.				
TITLE OF INVENTION. C.	AKTEDIEOE								
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE P	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE			
nonprovisional	NO	\$1400	)	\$300	\$1700	09/02/2005			
EXAM	IINER	ART UN	іт с	LASS-SUBCLASS	י				
COPPINS	, JANET L	1626		514-411000	J	,			
1 Change of correspondence	e address or indication of "F	ee Address" (37	2. For printing on	the patent front page, li	ist				
CFR 1.363). (1) the names of up to 3 registered patent attorneys 1 Kenyon & Ke									
Address form PTO/SB/12	lence address (or Change of 22) attached.	Correspondence	, ,	matively, single firm (having as :	a member a 2				
"Fee Address" indicat PTO/SB/47; Rev 03-02 ( Number is required.	tion (or "Fee Address" Indicator more recent) attached. Us	ation form e of a Customer	registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	BE PRINTED ON T	THE PATENT (print	or type)		<del></del>			
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will appear on T a substitute for filin	he patent. If an assign g an assignment.	nee is identified below, the d	locument has been filed for			
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
Teva Pharma	aceutical Ind	dustries	Ltd. P	etah Tiqva	, Israel				
Please check the appropriate				☐ Individual ☐ C	orporation or other private gr	oup entity Government			
4a. The following fee(s) are   ✓ Issue Fee	enclosed:	46	4b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.						
	mall entity discount permitte	ed)	Payment by credit card. Form PTO-2038 is attached.						
Advance Order - # of	Copies 10		The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number $11-0600$ (enclose an extra copy of this form).						
	(0)		Deposit Account Nu	mber <u>11-060</u>	(enclose an extra c	opy of this form).			
5. Change in Entity Status  a. Applicant claims Sl	(from status indicated above MALL ENTITY status. See		☐ b. Applicant is n	o longer claiming SMA	LL ENTITY status. See 37 C	FR 1.27(g)(2).			
The Director of the USPTO NOTE: The Issue Fee and Printerest as shown by the reco	is requested to apply the Issublication Fee (if required) vords of the United States Pate	ue Fee and Publicate will not be accepted ent and Trademark	tion Fee (if any) or to I from anyone other t Office.	re-apply any previous han the applicant; a reg	ly paid issue fee to the application istered attorney or agent; or the	ation identified above. ne assignee or other party in			
Authorized Signature	Josef a	Cypola		Date	AU6.31, 200	S			
Typed or printed name _	Joseph A.	Coppola		Registration No38,413					
an application. Confidentiali submitting the completed ap this form and/or suggestions	ity is governed by 35 U.S.C. plication form to the USPT for reducing this burden, slinia 22313-1450. DO NOT	<ul> <li>122 and 37 CFR</li> <li>O. Time will vary hould be sent to the</li> </ul>	1.14. This collection depending upon the Chief Information (	is estimated to take 12 individual case. Any co officer, U.S. Patent and	the public which is to file (an minutes to complete, includir omments on the amount of tie Trademark Office, U.S. Dep S. SEND TO: Commissioner	ng gathering, preparing, and me you require to complete artment of Commerce, P.O.			

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.